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PTO/SB/05 (11-00)  
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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

First Inventor

Marnoey

Title

Use of Photonic Band Gap Structures in Optical Amplifiers

Express Mail Label No.

EL 874 025 616 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)

2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.

3. ☒ Specification [Total Pages (preferred arrangement set forth below)  
- Descriptive title of the invention  
- Cross Reference to Related Applications  
- Statement Regarding Fed sponsored R & D  
- Reference to sequence listing, a table,  
or a computer program listing appendix  
- Background of the Invention  
- Brief Summary of the Invention  
- Brief Description of the Drawings (if filed)  
- Detailed Description  
- Claim(s)  
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets

5. Oath or Declaration

[Total Pages

a. ☒ Newly executed (original or copy)

b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)

i. ☐ **DELETION OF INVENTOR(S)**

Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer  
Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

a. ☐ Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); or

ii. ☐ paper

c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))

10. ☐ 37 CFR 3.73(b) Statement [ ] Power of Attorney  
(when there is an assignee)

11. ☐ English Translation Document (if applicable)

12. ☐ Information Disclosure [ ] Copies of IDS  
Statement (IDS)/PTO-1449 Citations

13. ☐ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)

16. ☐ Request and Certification under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35  
or its equivalent.

17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment,  
or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_ / \_\_\_\_\_

Prior application information:

Examiner \_\_\_\_\_

Group / Art Unit \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied  
under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by  
reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

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40,808

Signature

Date

12-21-01

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|   |  |                                     |  |
|---|--|-------------------------------------|--|
| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2002</h2> <p style="margin: 5px 0 0 40px;"><i>Patent fees are subject to annual revision.</i></p> |  | <b>Complete if Known</b>            |  |
|   |  | Application Number                  |  |
|   |  | Filing Date                         |  |
|   |  | First Named Inventor <b>Maroney</b> |  |
|   |  | Examiner Name                       |  |
|   |  | Group Art Unit                      |  |
| TOTAL AMOUNT OF PAYMENT   |  | <b>\$780.00</b>                     |  |
|   |  | Attorney Docket No. <b>537-1065</b> |  |

| METHOD OF PAYMENT   | FEE CALCULATION (continued)  |                       |                       |  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
|---|--|-----------------------|-----------------------|--|-----------------------|-----------------|----------|-----|-----|-----|--------------------|-------------------------------------|-----|-----|-----|-----|-------------------|--|-----|-----|-----|-----|------------------|-----------------------------|-----|-----|-------|-----|--------------------|--|-----|-----|------|-----|------------------------|--|---------------------|-----|--------|-----|--------|---|--------------|-----|----------------|----------|--------------|--|---|-------------|--------------------|--------------------------|-----|---|--------------------|-----|-----|-----|-----------------------|--|-----------------------|-----------------------|-----------------|----------|-----|---|-----|-----|------------------------|-----|-----|--|-----|-----|-----------------------------------|-----|-----|------------------|-----|-----|---------------------------------------|-----|-----|--|-----|-----|--|-----|-----|--------------------------|-----|-----|--|-----|---------------------|---|--|-----|-----|---------------|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|---------------------------------------|--|-----|-----|-----|-----|--|--|-----|----|-----|----|--|-------|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|---------------------|--|--|--|--|--|---------------------|--|--|--|--|----------------|
| <p><b>1.</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <b>12-0913</b></p> <p>Deposit Account Name</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR § 1.27</p> <p><b>2.</b> <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check   <input type="checkbox"/> Credit card   <input type="checkbox"/> Money Order   <input type="checkbox"/> Other</p>   | <p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non - English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR § 1.17(q)</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="5">Other fee (specify)</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (3)</b></td> <td><b>\$40.00</b></td> </tr> </tbody> </table> | Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code  | Small Entity Fee (\$) | Fee Description | Fee Paid | 105 | 130 | 205 | 65                 | Surcharge - late filing fee or oath |     | 127 | 50  | 227 | 25                | Surcharge - late provisional filing fee or cover sheet |     | 139 | 130 | 139 | 130              | Non - English specification |     | 147 | 2,520 | 147 | 2,520              | For filing a request for <i>ex parte</i> reexamination |     | 112 | 920* | 112 | 920*                   | Requesting publication of SIR prior to Examiner action |                     | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |              | 115 | 110            | 215      | 55           | Extension for reply within first month |   | 116         | 400                | 216                      | 200 | Extension for reply within second month |                    | 117 | 920 | 217 | 460                   | Extension for reply within third month |                       | 118                   | 1,440           | 218      | 720 | Extension for reply within fourth month |     | 128 | 1,960                  | 228 | 980 | Extension for reply within fifth month |     | 119 | 320                               | 219 | 160 | Notice of Appeal |     | 120 | 320                                   | 220 | 160 | Filing a brief in support of an appeal |     | 121 | 280  | 221 | 140 | Request for oral hearing |     | 138 | 1,510  | 138 | 1,510               | Petition to institute a public use proceeding |  | 140 | 110 | 240           | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR § 1.17(q) |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Statement |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) |  |  |  |  |  | <b>SUBTOTAL (3)</b> |  |  |  |  | <b>\$40.00</b> |
| Large Entity Fee Code   | Large Entity Fee (\$)  | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description  | Fee Paid              |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 105   | 130  | 205                   | 65                    | Surcharge - late filing fee or oath  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 127   | 50   | 227                   | 25                    | Surcharge - late provisional filing fee or cover sheet                     |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 139   | 130  | 139                   | 130                   | Non - English specification  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 147   | 2,520  | 147                   | 2,520                 | For filing a request for <i>ex parte</i> reexamination                     |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 112   | 920*   | 112                   | 920*                  | Requesting publication of SIR prior to Examiner action                     |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 113   | 1,840*   | 113                   | 1,840*                | Requesting publication of SIR after Examiner action                        |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 115   | 110  | 215                   | 55                    | Extension for reply within first month                                     |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 116   | 400  | 216                   | 200                   | Extension for reply within second month                                    |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 117   | 920  | 217                   | 460                   | Extension for reply within third month                                     |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 118   | 1,440  | 218                   | 720                   | Extension for reply within fourth month                                    |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 128   | 1,960  | 228                   | 980                   | Extension for reply within fifth month                                     |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 119   | 320  | 219                   | 160                   | Notice of Appeal   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 120   | 320  | 220                   | 160                   | Filing a brief in support of an appeal                                     |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 121   | 280  | 221                   | 140                   | Request for oral hearing   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 138   | 1,510  | 138                   | 1,510                 | Petition to institute a public use proceeding                              |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 140   | 110  | 240                   | 55                    | Petition to revive - unavoidable   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 141   | 1,280  | 241                   | 640                   | Petition to revive - unintentional   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 142   | 1,280  | 242                   | 640                   | Utility issue fee (or reissue)   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 143   | 460  | 243                   | 230                   | Design issue fee   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 144   | 620  | 244                   | 310                   | Plant issue fee  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 122   | 130  | 122                   | 130                   | Petitions to the Commissioner  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 123   | 50   | 123                   | 50                    | Processing fee under 37 CFR § 1.17(q)                                      |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 126   | 180  | 126                   | 180                   | Submission of Information Disclosure Statement                             |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 581   | 40   | 581                   | 40                    | Recording each patent assignment per property (times number of properties) | 40.00                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 146   | 740  | 246                   | 370                   | Filing a submission after final rejection (37 CFR § 1.129(a))              |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 149   | 740  | 249                   | 370                   | For each additional invention to be examined (37 CFR § 1.129(b))           |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 179   | 740  | 279                   | 370                   | Request for Continued Examination (RCE)                                    |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 169   | 900  | 169                   | 900                   | Request for expedited examination of a design application                  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| Other fee (specify)   |  |                       |                       |  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| <b>SUBTOTAL (3)</b>   |  |                       |                       |  | <b>\$40.00</b>        |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| <p><b>FEE CALCULATION</b></p> <p><b>1. BASIC FILING FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td>740.00</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td><b>\$740.00</b></td> </tr> </tbody> </table> <p><b>2. EXTRA CLAIM FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><b>14</b> -20** = <b>0</b></td> <td>X</td> <td><b>0.00</b></td> </tr> <tr> <td>Independent Claims</td> <td><b>2</b> -3** = <b>0</b></td> <td>X</td> <td><b>0.00</b></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td><b>\$0.00</b></td> </tr> </tbody> </table> | Large Entity Fee Code  | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$)  | Fee Description       | Fee Paid        | 101      | 740 | 201 | 370 | Utility filing fee | 740.00                              | 106 | 330 | 206 | 165 | Design filing fee |  | 107 | 510 | 207 | 255 | Plant filing fee |                             | 108 | 740 | 208   | 370 | Reissue filing fee |  | 114 | 160 | 214  | 80  | Provisional filing fee |  | <b>SUBTOTAL (1)</b> |     |        |     |        | <b>\$740.00</b>                                     | Extra Claims |     | Fee from below | Fee Paid | Total Claims | <b>14</b> -20** = <b>0</b>             | X | <b>0.00</b> | Independent Claims | <b>2</b> -3** = <b>0</b> | X   | <b>0.00</b>                             | Multiple Dependent |     |     |     | Large Entity Fee Code | Large Entity Fee (\$)                  | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | Fee Paid | 103 | 18                                      | 203 | 9   | Claims in excess of 20 |     | 102 | 84                                     | 202 | 42  | Independent claims in excess of 3 |     | 104 | 280              | 204 | 140 | Multiple dependent claim, if not paid |     | 109 | 84                                     | 209 | 42  | ** Reissue independent claims over original patent |     | 110 | 18                       | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2)</b> |   |  |     |     | <b>\$0.00</b> |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| Large Entity Fee Code   | Large Entity Fee (\$)  | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description  | Fee Paid              |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 101   | 740  | 201                   | 370                   | Utility filing fee   | 740.00                |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 106   | 330  | 206                   | 165                   | Design filing fee  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 107   | 510  | 207                   | 255                   | Plant filing fee   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 108   | 740  | 208                   | 370                   | Reissue filing fee   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 114   | 160  | 214                   | 80                    | Provisional filing fee   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| <b>SUBTOTAL (1)</b>   |  |                       |                       |  | <b>\$740.00</b>       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| Extra Claims  |  | Fee from below        | Fee Paid              |  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| Total Claims  | <b>14</b> -20** = <b>0</b>   | X                     | <b>0.00</b>           |  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| Independent Claims  | <b>2</b> -3** = <b>0</b>   | X                     | <b>0.00</b>           |  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| Multiple Dependent  |  |                       |                       |  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| Large Entity Fee Code   | Large Entity Fee (\$)  | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description  | Fee Paid              |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 103   | 18   | 203                   | 9                     | Claims in excess of 20   |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 102   | 84   | 202                   | 42                    | Independent claims in excess of 3  |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 104   | 280  | 204                   | 140                   | Multiple dependent claim, if not paid                                      |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 109   | 84   | 209                   | 42                    | ** Reissue independent claims over original patent                         |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| 110   | 18   | 210                   | 9                     | ** Reissue claims in excess of 20 and over original patent                 |                       |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |
| <b>SUBTOTAL (2)</b>   |  |                       |                       |  | <b>\$0.00</b>         |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                             |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |     |                |          |              |  |   |             |                    |                          |     |   |                    |     |     |     |                       |  |                       |                       |                 |          |     |   |     |     |                        |     |     |  |     |     |                                   |     |     |                  |     |     |                                       |     |     |  |     |     |  |     |     |                          |     |     |  |     |                     |   |  |     |     |               |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                       |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |                     |  |  |  |  |                |

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|-------------------|-------------------------|-----------------------------------|---------------------|
| Name (Print/Type) | <b>Peter J. Shakula</b> | Registration No. (Attorney/Agent) | <b>26,808</b>       |
| Signature         |                         | Telephone                         | <b>312-368-1300</b> |
|                   |                         | Date                              | <b>12-21-01</b>     |

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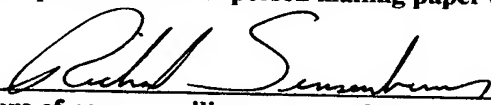
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